

## **Independent Lab Provider Type 37**

### **Information about the program:**

- Out-of-state providers may enroll.
- All forms must be signed and dated by authorized personnel.
- Provider must have “bricks & mortar”.
- Independent labs must be licensed by the state of Kentucky or the state in which services are provided.

### **Additional Information to be submitted by the provider for application processing:**

- MAP-811 Non-Credentialed
- MAP-811 Addendum E
- Lab must be supervised by a Physician Director (copy of physician’s license)
- Copy of Physician Director’s Pathology specialty certificate
- CLIA
- W-9
- NPI and Taxonomy Verification

### **Important addresses:**

- Office of Inspector General  
275 East Main Street  
Frankfort, KY 40621
- KY Medicaid  
Provider Enrollment  
P.O. Box 2110  
Frankfort, KY 40602